

ISSUE SLIP STAPLE AREA (for additional cross reference)

POSITION	INITIALS	IL NO.	DATE
FEE DETERMINATION	T1		7-3-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	T2	947	1509161

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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